

File with:
Iowa Ethics and Campaign
Disclosure Board
510 E. 12th Ste. 1A
Des Moines, Iowa 50319
Fax: 515-281-4073

FOR INSTRUCTIONS, SEE BACK OF FORM
DISCLOSURE SUMMARY PAGE

IA ETHICS AND
CAMPAIGN DISCLOSURE BOARD
2009 OCT 30 PM 3:42

COMMITTEE NAME (Must be same as on Statement of Organization)

Lynn Kueck Committee for Mayor

IMPORTANT: Indicate by # type of committee you are reporting for:

(1) Statewide/Judge Standing for Retention Candidate (2) State PAC (3) State Party
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political
Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name

Lynn Kueck

Political Party (If applicable)

Office Sought

Mayor for Algona

District (If Senate or House)

FORM DR-2 (Rev. 07/2007)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	_____
Logged In	_____
Scanned	_____
Computer	_____
Audited	_____

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a

Kirk M. Struthers
SIGNATURE OF PERSON FILING REPORT

515-293-5329
TELEPHONE

10-30-09
DATE SIGNED

Wesley Farms

I AM FILING A 10-29-09
(report date)

REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.

Indicate by # ☐

☐ CHECK IF AMENDMENT TO REPORT DATED _____

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election
November 3, 2009
County & Local Committees, enter County in which Election is held
Kossuth

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.) \$ -0-

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (**also see in-kind below) \$ 1960.00

Schedule F: Loans Received total (Attach Schedule F) \$ _____

Schedule H: Total Sales of Campaign Property (Attach Schedule H) \$ _____

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL \$ _____

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below) \$ 1832.69

Schedule F: Loan Repayments total (Attach Schedule F) \$ _____

CASH ON HAND at the end of this reporting period (if final report balance must be zero) \$ 127.31

****UNPAID BILLS** (From Schedule D - Attach Schedule D) \$ -0-

****IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E) \$ -0-

****OUTSTANDING LOANS** (From Schedule F - Attach Schedule F) \$ -0-

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES ☒ NO

CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) \$ -0-

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONEY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Lynn Kueck Committee for Mayor

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
9-11-09	ID# CK#	Jim Voigt 307 Rock St Algona, Ia 52511		\$50.00	<input type="checkbox"/>
9-11-09	ID# CK#	Charles Bjustram 1023 E. Mich. St Algona, Ia 52511		100.00	<input type="checkbox"/>
9-11-09	ID# CK#	Mark Laubenthal 105 N. Roan Algona, Ia 52511		50.00	<input type="checkbox"/>
9-11-09	ID# CK#	James Buscher 116 S. Putnam Algona, Ia 52511		50.00	<input type="checkbox"/>
9-11-09	ID# CK#	Harold Bjustram 512 N. Clarke St Algona, Ia 52511		50.00	<input type="checkbox"/>
9-11-09	ID# CK#	Olga Frame 1304 N. Roan Algona, Ia 52511		50.00	<input type="checkbox"/>
9-11-09	ID# CK#	J. W. Goelan 2415 Valley View Dr. Algona, Ia 52511		100.00	<input type="checkbox"/>
9-11-09	ID# CK#	Mark Feist 1500 E. McGrath St Algona, Ia 52511 CASH		50.00	<input type="checkbox"/>
9-11-09	ID# CK#	Rich Capasias 109 E. Birch St. Algona, Ia 52511 CASH		38.00	<input type="checkbox"/>
9-11-09	ID# CK#	Kirk M. Struthers 1620 E. Mich. St Algona, Ia 52511 CASH		20.00	<input type="checkbox"/>

SUB-TOTAL

\$570.00

TOTAL (if last page of this schedule)

\$

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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(for Schedule A)

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONEY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Lynn Kueck Committee for Mayor

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9-11-09	ID# CK#	Kenneth Krapp 201 N. Maple St Algona, Ia. 52511		\$ 50.00	<input type="checkbox"/>
9-15-09	ID# CK#	Dr. Kenton Moss 1802 Highway 164 S. Algona, Ia. 52511		58.00	<input type="checkbox"/>
9-15-09	ID# CK#	James Stotter 2509 E. State St Algona, Ia. 52511		50.00	<input type="checkbox"/>
9-15-09	ID# CK#	Mark Erpelting 213 Beick St Algona, Ia. 52511		100.00	<input type="checkbox"/>
9-16-09	ID# CK#	Brian Buscher 848 S Main St Algona, Ia. 52511		100.00	<input type="checkbox"/>
9-16-09	ID# CK#	Buscher Bros. 1015 N. Main St Algona, Ia. 52511		75.00	<input type="checkbox"/>
9-19-09	ID# CK#	Tom Erpelting 245 Brookridge Algona, Ia. 52511		100.00	<input type="checkbox"/>
9-19-09	ID# CK#	Reding Gravel & Excavating 2001 E. Oak St Algona, Ia. 52511		100.00	<input type="checkbox"/>
9-19-09	ID# CK#	Shane Noonan 114 Richardson Ct Algona, Ia. 52511		100.00	<input type="checkbox"/>
9-19-09	ID# CK#	Roger Bell 500 Timber Est Algona, Ia. 52511		50.00	<input type="checkbox"/>

SUB-TOTAL

\$ 775.00

TOTAL (if last page of this schedule)

\$

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(for Schedule A)

For Instructions, See Back of Form

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CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE

A

(Rev. 07/03)

MONETARY
RECEIPTS☐ CHECK THIS BOX IF
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Lynn Kueck Committee for Mayor

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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9-19-09	ID# CK#	Francis Bjurstrom 1914 E. Lucas St. Algona, Ia. 50511		\$50.00	<input type="checkbox"/>
9-19-09	ID# CK#	Shirley Kline 1623 E. McGregor St. Algona, Ia. 50511		25.00	<input type="checkbox"/>
9-19-09	ID# CK#	Mark Bjerstedt 1214 E. Elm St. Algona, Ia. 50511 Cash		50.00	<input type="checkbox"/>
9-19-09	ID# CK#	Charles Kline 1623 E. McGregor St. Algona, Ia. 50511 CASH		100.00	<input type="checkbox"/>
9-24-09	ID# CK#	Paul Johnson 118 S. McCoy St. Algona, Ia. 50511		50.00	<input type="checkbox"/>
9-28-09	ID# CK#	Dr. D.M. Holmes 389 E. North St. Algona, Ia. 50511		50.00	<input type="checkbox"/>
9-28-09	ID# CK#	Robert Rutake 1214 E. State St. Algona, Ia. 50511		50.00	<input type="checkbox"/>
9-28-09	ID# CK#	Dave Fenchel 219 N. Clarke St. Algona, Ia. 50511 Cash		50.00	<input type="checkbox"/>
9-28-09	ID# CK#	Jack Limbake 1918 Irvington Rd. Algona, Ia. 50511 Cash		50.00	<input type="checkbox"/>
9-28-09	ID# CK#	River Road Golf Club 2308 River Rd. Algona, Ia. 50511		20.00	<input type="checkbox"/>

SUB-TOTAL

\$495.00

TOTAL (if last page of this schedule)

\$

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(for Schedule A)

For Instructions, See Back of Form

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SCHEDULE

A

(Rev. 07/03)

MONETARY
RECEIPTS☐ CHECK THIS BOX IF
AMENDING FORM

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

Lynn Kuest Committee for Mayor

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10-2-09	ID# CK#	James Andrusak 1000 S. Main St Algona, Ia 52511		\$25.00	<input type="checkbox"/>
12-12-09	ID# CK#	Peter C. Reding 110 Parkside Dr Algona, Ia 52511		50.00	<input type="checkbox"/>
12-12-09	ID# CK#	Jerry Puffer 928 Diegual St Algona, Ia 52511		25.00	<input type="checkbox"/>
12-14-09	ID# CK#	Mark Moore 215 E. McGregor St Algona, Ia 52511 Cash		10.00	<input type="checkbox"/>
12-14-09	ID# CK#	Elger Miller 1803 Highway 140 Rd Algona, Ia 52511 Cash		10.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 120.00

TOTAL (if last page of this schedule)

\$ 190.00

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(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Lynn Kueck Committee for Mayor

DATE EXPENDED (MM/DD/YY)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
9-14-09	ID# CK#	Printing Plus 306 E. 5th St Algona, Ia 52551	Advertising Cards	\$ 74.85
9-16-09	ID# CK#	ABC Sign & Design 3344 1st St Uniondale, Ia 52522	Yard Signs	\$ 913.84
10-15-09	ID# CK#	Algona Publishing 14 E. 5th St Algona, Ia 52551	Newspaper Advertising	\$ 368.00
10-15-09	ID# CK#	KLEA Radio P.O. Box 160 Algona, Ia 52551	Radio Ads	\$ 482.00
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 1832.69
TOTAL (If last page of this schedule)				\$ 1832.69

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(f).)

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(for Schedule B)